

**NATIONAL TRANSPORTATION SAFETY BOARD
PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT**

This form to be used for reporting civil and public aircraft accidents and incidents

BASIC INFORMATION

Accident/Incident Location: Altitude SC State South Date: 3/7/20 Local Time: 10:45
 Nearest City/Town: Altitude ZIP: 29924 Country: US Latitude: N32-53.7 Longitude: W081-16.2
(Enter in decimal degrees or degrees minutes seconds)
 Collision with Other Aircraft: ☐ Mid-air ☐ On-ground ☐ None

AIRCRAFT INFORMATION

Registration Number: N4300W ☐ IFR-Equipped and Certified
 Manufacturer: Cessna ☐ Commercial Space Flight
 Model: P210N ☐ Unmanned Aircraft
 Serial Number: 2000794 Maximum Gross Weight: 4000 lbs
 Year of Manufacture: 1981 Weight at Time of Accident/Incident: 3300 lbs
 Amateur-Built: ☒ Yes ☐ No ☐ Kit/Plan ☐ Original Design
 Number of Seats: 6 Flight Crew Seats: 2
 Cabin Crew Seats: 2 Passenger Seats: 4
 Number of Engines: 2

Category of Aircraft: ☒ Airplane ☐ Balloon ☐ Blimp/dirigible ☐ Glider ☐ Gyroplane ☐ Helicopter ☐ Powered Lift ☐ Rocket ☐ Ultralight ☐ Unknown
 Type of Airworthiness Certificate: ☒ Standard ☐ Special ☐ Restricted ☐ Limited ☐ Provisional ☐ Experimental ☐ Experimental Light-Sport ☐ Experimental Light-Sport
 Landing Gear: ☒ Fixed ☐ Retractable ☐ Tailwheel ☐ High Wheel ☐ Skid ☐ Float ☐ Hull ☐ Other Launch/Recovery System ☐ None ☐ Unknown
 Engine Type (Select one): ☒ Reciprocating ☐ Liquid Rocket ☐ Turbo Shaft ☐ Solid Rocket ☐ Turbo Prop ☐ Hybrid Rocket ☐ Turbo Jet ☐ None ☐ Turbo Fan ☐ Unknown ☐ Electric
 Fuel System Type (Reciprocating): ☐ Carburetor ☐ Fuel-Injected

Engine	Engine Manufacturer	Engine Model/Serial	Manufacturer's Serial Number	Date of Mfg. overhaul	Rated Power (Horsepower or lbs of Thrust)	Total Time (hours)	Time Since Inspection (hours)	Overhaul (hours)
Eng. 1	Cessna	TS10-520-P	27862R		310			2
Eng. 2								
Eng. 3								
Eng. 4								

Last Inspection Type: ☒ Annual ☐ Conditional Inspection ☐ Continuous Airworthiness ☐ Other Approved Inspection Program (AIP) ☐ Other, specify: Time of Accident/Incident
 Date Last Inspection: 3/7/20
 Airframe Total Time: 5719 hours
 hours measured at (Select one): ☐ Last Inspection ☒ Time of Accident/Incident

Propeller 1: ☐ Fixed Pitch ☒ Controllable Pitch ☐ Ground Adjustable
 Manufacturer: McCulloch Model: D3439C402-C
 Propeller 2: ☐ Fixed Pitch ☒ Controllable Pitch ☐ Ground Adjustable
 Manufacturer: Model:

Type of Maintenance Program (Select one): ☐ Annual ☐ Conditional (Amateur-built only) ☐ Manufacturer's Inspection Program ☐ Other Approved Inspection Program (AIP) ☐ Continuous Airworthiness ☐ Other, specify:
 Description of Fire Extinguishing System: ☐ None ☐ Specify:
 Was ELY still mounted in aircraft? ☒ Yes ☐ No
 Was ELY still connected to antenna? ☒ Yes ☐ No
 Did ELY activate? ☒ Yes ☐ No
 If activated:
 Did ELY Aid in Locating Aircraft: ☐ Yes ☒ No
 If not activated:
 Indicate Reason: ☐ Impact Damage ☐ Fire Damage ☐ Battery Expired/Damaged ☐ Unknown

Additional Equipment (Check all that apply):
☒ ADS-B ☐ Airframe Parachute ☐ Angle of Attack Indicator ☐ Autopilot ☐ Data Recorder ☐ Electronic Flight Bag or Handheld Device ☐ Electronic Multifunction Display ☐ Electronic Primary Flight Display ☐ Handheld GPS ☐ Heads Up Display ☐ Onboard Weather ☐ Satellite Tracking Device ☐ Stall Warning System ☐ Video Recording Device ☐ Other, Specify:

OWNER/OPERATOR INFORMATION

Registered Aircraft Owner

 Name: N206DJ, LLC

 City: Garnesville

 State: TX ZIP: 73041

 Fractional Ownership Aircraft: ☐ Yes ☒ No

 Country: US

Operator of Aircraft

☒ Same As Registered Owner

☐ Same Address as Registered Owner

 Name: J

City: _____

Doing Business As: _____

State: _____

ZIP: _____

Air Carrier/Operator Designator (4 Character Code): _____

Country: _____

Operating Certificates Held

(Check all that apply)

- ☒ None
☐ Flag Carrier Operating Certificate (FAR 121)
☐ Supplemental
☐ Air Cargo
☐ Foreign Air Carrier (FAR 129)
☐ Rotorcraft External Load (FAR 133)
☐ Commuter Air Carrier (FAR 135)
☐ On-Demand Air Taxi (FAR 135)
☐ Commercial Air Tour (FAR 136)
☐ Agricultural Aircraft (FAR 137)
☐ Pilot School (FAR 141)
☐ Certificate of Authorization or Waiver (COA)
☐ Commercial Space Transportation
 Experimental Permit
☐ Commercial Space Transportation License
☐ Other Operator of Large Aircraft

Regulation Flight Conducted Under

- ☒ FAR 91 ☐ FAR 129 ☐ FAR 415
☐ FAR 103 ☐ FAR 133 ☐ FAR 431
☐ FAR 121 ☐ FAR 131 ☐ FAR 435
☐ FAR 125 ☐ FAR 137 ☐ FAR 437

- ☐ FAR 91 Special Flight
☐ Non-US, Commercial
☐ Non-US, Non-commercial

Public Aircraft (Select one)

- ☐ Armed Forces
☐ Federal
☐ State
☐ Local
☐ Unknown

Revenue Operation for FAR 121, 125, 129, 135

(Select one for each group)

- ☐ Scheduled or Commuter ☐ Domestic
☐ Non-Scheduled or Air Taxi ☐ International
☐ Passenger
☐ Cargo
☐ Mail Contract Only

Purpose of Flight for FAR 91, 103, 133, 137

(Select one)

- ☐ Aerial Application ☐ Firefighting ☐ Unknown
☐ Aerial Observation ☐ Flight Test
☐ Air Drop ☐ Under Tow
☐ Air Race/Show ☐ Instructional
☐ Banner Tow ☐ Other Work Use
☐ Business ☒ Personal
☐ Executive/Corporate ☐ Positioning
☐ External Load ☐ Skydiving
☐ Ferry

Revenue Sightseeing Flight
☐ Yes ☐ No

Air Medical Flight
☐ Yes ☐ No

AIRPORT INFORMATION (Fill in if accident/incident occurred on approach, landing, takeoff, departure, or within 3 miles of an airport)

 Airport Name: Atterdale County Airport

 Distance From Airport Center: 5(?) mi

 Airport Identifier: KAGX

 Direction From Airport: 180 degrees true

 Proximity to Airport: ☒ Off Airport/Airstrip ☐ On Airport/Airstrip ☐ N/A

 Airport Elevation: 1618 ft. msl

Runway Information

 Runway ID: 35 (L/R/C) Length: 4990 ft Width: 75 ft

Runway/Landing Surface (Check all that apply)

- ☒ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water
☐ Concrete ☐ Gravel ☐ Metal/Wood ☐ Unknown
☐ Dirt ☐ Ice ☐ Snow

Condition of Runway/Landing Surface (Check all that apply)

- ☒ Dry ☐ Snow-Compacted ☐ Water-Calm
☐ Holes ☐ Snow-Crusted ☐ Water-Choppy
☐ Ice Covered ☐ Snow-Dry ☐ Water-Glasy
☐ Rough ☐ Snow-Wet ☐ Wet
☐ Rubber Deposits ☐ Soft
☐ Slash-Covered ☐ Vegetation ☐ Unknown

Approach/Departure Segment (Select one)

- ☐ Taxi ☐ VFR Departure ☐ On Instrument Approach ☐ Downwind ☐ Low Approach
☐ Takeoff ☐ IFR Departure Procedure/Clearance ☐ Landing ☐ Base ☐ Go Around
☐ Initial Climb ☐ Final ☐ Aborted Landing (after touchdown) ☐ Unknown

IFR Approach (Check all that apply)

- ☐ None
☐ ADF/NDB ☐ PAR ☐ MLS ☐ Practice
☐ SDF ☐ Sidestep ☐ LDA ☐ GPS
☐ VOR/TVOR ☐ ILS ☐ ASR
☐ VOR/DME ☐ Localizer Only ☐ Visual
☐ TACAN ☐ LOC-back course ☐ Contact
☐ RNAV ☐ Circling ☐ Unknown

VFR Approach (Check all that apply)

- ☐ None
☐ Traffic Pattern ☐ Stop and Go
☐ Straight-In ☐ Touch and Go
☐ Valley/Terrain Following ☐ Simulated Forced Landing
☐ Go Around ☐ Forced Landing
☐ Full Stop ☐ Precondition Landing
☐ Unknown

FLIGHT ITINERARY INFORMATION

Last Departure Point Airport ID: <u>KGMV</u> City: <u>Gainesville</u> State: <u>TX</u> Country: <u>US</u>	Time of Departure Time: <u>8:30</u> Time Zone: <u>East</u>	Destination Airport ID: <u>KAGX</u> City: <u>Altitude</u> State: <u>SC</u> Country: <u>US</u>	Type Flight Plan Filed ☒ None ☐ VFR/IFR ☐ Company VFR ☐ IFR ☐ Military VFR ☐ Unknown ☐ VFR Activated? ☐ Yes ☐ No ☐ Unknown
---	--	---	--

Type of ATC Clearance/Service (Check all that apply) ☐ None ☐ Special VFR ☐ Special IFR ☒ VFR Flight Following ☐ Cruise ☐ VFR ☐ IFR ☐ VFR On Top ☐ Traffic Advisory ☐ Unknown / NA	Airspace where the accident/incident occurred (Check all that apply) ☐ Class A ☐ Class G ☐ Military Operations Area (MOA) ☐ Special ☐ Class B ☐ Class C ☐ Airport Advisory Area ☐ Air Traffic Control Area ☐ Class D ☐ Warning Area ☐ Jet Training Area ☐ Unknown ☒ Class E ☐ Prohibited Area ☐ TRSA ☐ Restricted Area ☐ FAR 93	Altitude of In-Flight Occurrence: _____ ft msl
---	--	--

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE

Source of Pilot Weather Information (Check all that apply) ☐ National Weather Service ☐ Company ☐ Flight Service Station ☐ Military ☐ TV/Radio ☐ Internet ☒ Automated Report ☐ None ☐ Commercial Weather Service (DUATS) ☐ Unknown ☒ On-Board Weather	Weather Observation Facility Facility ID: <u>KAGX</u> Observation Time: <u>10:45 am</u> Time Zone: <u>Eastern</u> Distance from Accident Site: <u>.5</u> nm Direction from Accident Site: <u>360</u> degrees true
--	--

Basic Conditions ☒ VMC ☐ DMC ☐ Unknown	Light Condition ☒ Day ☐ Dusk ☐ Dark Night ☐ Unknown ☐ Night ☐ Bright Night
---	---

Sky/Lowest Cloud Condition ☒ Clear ☐ Thin Broken ☐ Broken ☐ Obscured ☐ Few ☐ Thin Overcast ☐ Broken ☐ Indefinite ☐ Partial Obscuration ☐ Unknown ☐ Overcast ☐ Unknown ☐ Scattered	Temperature: _____ (C) or _____ (F) Dew Point: _____ (C) or _____ (F) Altimeter Setting: <u>30.10</u> in. Hg or _____ mm Hg
---	---

Lowest Cloud Condition Height _____ ft agl	Ceiling Height _____ ft agl
---	--------------------------------

Wind Direction ☒ Variable Direction: _____ degrees true	Wind Speed ☒ Light and Variable Speed: <u>4 kn</u> kts	Wind Gusts ☐ Not Gusting Speed: _____ kts	Visibility <u>1.0</u> miles RVR: _____ feet RVR: _____ miles Density Altitude: <u>?</u> ft
---	--	--	--

Intensity of Precipitation ☐ Light ☐ Moderate ☐ Heavy ☐ N/A ☐ Unknown	Type of Precipitation (Check all that apply) ☒ None ☐ Drizzle ☐ Freezing Rain ☐ Rain ☐ Ice Pellets ☐ Snow Shower ☐ Snow ☐ Snow Pellets ☐ Ice Pellets Shower ☐ Hail ☐ Snow Grains ☐ Freezing Drizzle ☐ Rain Showers ☐ Ice Crystals	Restriction to Visibility (Check all that apply) ☒ None ☐ Fog ☐ Ground Fog ☐ Blowing Dust ☐ Haze ☐ Ice Fog ☐ Blowing Sand ☐ Smoke ☐ Unknown ☐ Blowing Snow ☐ Dust
---	---	---

Icing Forecast Amount: ☒ None ☐ Trace ☐ Light ☐ Moderate ☐ Severe ☐ Unknown Type: ☐ N/A ☐ Rime ☐ Clear ☐ Mixed ☐ Unknown	Icing Actual Amount: ☒ None ☐ Trace ☐ Light ☐ Moderate ☐ Severe ☐ Unknown Type: ☐ N/A ☐ Rime ☐ Clear ☐ Mixed ☐ Unknown	Turbulence Type (Check all that apply) ☒ None ☐ Clear Air ☐ Terrain-Induced ☐ Convective Turbulence Severity ☐ Light ☐ Moderate ☐ Severe ☐ Extreme
--	--	---

NOTAMS (D and FDC), AIRMETS, SIGMETS, PIREPs in effect at the time of the accident/incident:

Burned with logs.

DAMAGE TO AIRCRAFT AND OTHER PROPERTY

Aircraft Damage

- ☐ None
☐ Minor
☒ Substantial
☒ Destroyed
☐ Unknown

Aircraft Fire

- ☐ None
☐ In-Flight
☒ On-Ground
☐ Both Ground and In-Flight
☐ Fire at Unknown Time
☐ Unknown

Aircraft Explosion

- ☐ None
☒ In-Flight
☒ On-Ground
☐ Both Ground and In-Flight
☐ Explosion at Unknown Time
☐ Unknown

Description of Damage to Aircraft and Other Property (Use additional sheet if necessary)

Nose impact initially then totally consumed by fire.
(80%)

→ because in break in.

NARRATIVE HISTORY OF FLIGHT (Please type or print in ink)

Describe what occurred in chronological order including circumstances leading to and nature of accident/incident. Describe terrain and include wreckage distribution sketch if pertinent. Attach extra sheets if needed. State departure time and location, services obtained, and intended destination. Provide as much detail as possible.

Preflight - 8/7 @ 6:30 am @ KGNV. Topped, we were VFR
 direct @ 8:30 am from KGNV to KAGX, but were diverted
 to avoid RA 3005 (Savannah). Climbed slowly to 5000 to keep
 oil temps 190-210. Terminated flight following @ north edge
 of Savannah airspace. Self announced from there
 until crash on 122.R. Engine quit on final. No noise
 or warning. Flaps full, gear down. Determined sink rate
~~to be greater~~ to clear trees @ ~~the~~ South end of 35.

Turned ~~west~~ west to try crop field and while doing
 so tried one restart. No joy. Back to R tank. Hung
 (with tank
 change to L)
 from R

right main into top of tree, caused right wing to dip
 which then hooked another tree causing abrupt

270° Alt 3pm. Pancaked nose down pointing
 @ 180° then hit ^{into trees} (on edge of field) first. Immediate fire
 both sides and fore. Exited emergency door. Walked
 away and ~~heard~~ heard first explosion and turned
 and saw second one. Alt helicoptered to hospital - Savannah;
 Passenger helicoptered to hospital in Augusta.

RECOMMENDATION (How could this accident/incident have been prevented?)

Operator/Owner Safety Recommendation

None. I don't know.

MECHANICAL MALFUNCTION/FAILURE (If more space is needed, continue on separate sheet)Was there Mechanical Malfunction/Failure? ☐ Yes ☒ No

(If yes, list the name of the part, manufacturer, part no., serial no., and describe the failure.)

Don't know.

Total Time/Cycles
On Part

_____ Hours

_____ Cycles

Time Since This Part
Inspected/Overhauled

_____ Hours

FUEL & SERVICES INFORMATIONFuel on Board at Last Takeoff
(Convert from pounds, as necessary)

89

Gallons

Fuel Type

☐ 80/87☒ 100 Low Lead☐ 100/130☐ 115/145☐ Jet A☐ Jet A-1☐ Jet B☐ JP8☐ Automotive☐ Other, specify _____

Other Services, if Any, Prior to Departure

Full preflight by check list.

EVACUATION OF AIRCRAFTWas an emergency evacuation of the aircraft performed? ☒ Yes ☐ No

Method of Exit - Describe how the occupants exited and how many occupants evacuated each location

out of emergency door. 2 occupants exited.

OTHER AIRCRAFT - COLLISION (If air or ground collision occurred, complete this section for other aircraft)

Aircraft Registration Number

Manufacturer:

Model:

Damage to Other Aircraft

☐ Destroyed ☐ Minor☐ Substantial ☐ None

Registered Owner of Other Aircraft

Pilot of Other Aircraft

Name:

Name:

City:

City:

State:

ZIP:

State:

ZIP:

Country:

Country:

ADDITIONAL INFORMATION (Please type or print in ink)

Use this space if additional space is needed for any answers.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Date of this Report

8/14/20
Investigator

Name of Pilot/Operator

Signature:

John E. Hanyer

☒ Check box to electronically sign this document

Is a P-type Pilot or Pilot/Operator in this Report?

Name:

Title:

Signature:

☒ Check box to electronically sign this document**FOR NTSB USE ONLY**

NTSB Accident/Incident No.

ERA20LA278

Reviewed by NTSB Regional Office

ERA - VA

Name of Investigator

H. Kemner

Date Report Received

8/14/2020